CONFIRMATION NO.

#### PART B - FEE(S) TRANSMITTAL

and send this form, together with applicable fee(s), to: Mail Completo TRADEM

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

FIRST NAMED INVENTOR

(703) 746-4000 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Dlock 1 for any change of address)

FILING DATE

23914

APPLICATION NO.

7590

12/16/2004

STEPHEN B. DAVIS BRISTOL-MYERS SQUIBB COMPANY PATENT DEPARTMENT P O BOX 4000 PRINCETON, NJ 08543-4000

Note: A certificate of mailing can only be used for demestic mailings of the Fee(s) Transmital. This certificate caunot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FRE address above, or being facsimile
transmitted to the USPTO (703) 746-4000, on the date indicated below.

Paul D. Golian (Depositor's pame) 1/2 (Signature 3/10/05 (Date)

ATTORNEY DOCKET NO.

10/630,406	07/30/2003		M≈ria Jure Kunkel		D	0288 NP	5418	
TLE OF INVENTION:	HUMANIZED ANTIBODIE	s against huma	AN 4-1BB					
		•						
appln. Type	SMALL ENTITY	ISSUE PE	E	PUBLICATION FEE		FEE(S) DUE	DATE DUE	
nonprovisional	ИО	\$1400		\$300		\$1700	03/16/2005	
EXAMINER.		ART UNI	τ	CLASS-SUBCLASS				
CHEU, CA	ianghwa j	1641		435-326000				
Thange of correspondent	ce address or indication of "F	ee Address" (37		on the patent front p		Paul	D. Golian	
	dence address (or Change of 122) attached.	Correspondence	or agents OR,		•			
TR	122) anacoco. ation (or "Pec Address" Indic		(2) the name of a single firm (having as a member a registered automay or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3					
TO/SB/47; Rev 03-02 Number is required.	2 registered patent attorneys or agents. If no name is							
SSIGNEE NAME AN	D RESIDENCE DATA TO E	E PRINTED ON TE	HE PATENT (pr	int or type)				
PLEASE NOTE: Unica ecordation as set forth i	s an assignee is identified b n 37 CFR 3.11. Completion						document has been filed for	
A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY/2005 MBIZUNE2 00000018 193880 106					
•	rs Squibb Compa	i <b>ny</b>	Prince	eton, NJ	01 FC:15	01 140 04 30	00.00 DA 00.00 DA	
ase check the appropriat	e assignee category or catego	ries (will not be prin	ned on the paten	): 🔘 Individual	E caro Frish	Pother private gr	30p entity 🖵 Government	
The following fee(s) are	enclosed:	4b. 1	Payment of Fee(	s):				
	Issue For A check in the amount of the fee(x) is enclosed.							
Publication Fee (No :	small entity discount permits		Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # o	$\[ \]$ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $19-3880$ (enclose an extra copy of this form).							
hange in Entity Status	(from stams indicated above	·) _						
🛮 a. Applicant chims S	MALL ENTITY status. See	37 CFR 1.27.	🗖 b. Applicant i	no longer claiming	SMALL ENTITY	status. See 37 C	FR 1.27(g)(2).	
Director of the USPTO TE: The Issue Fee and P	is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate	c Fee and Publication of the second of the s	on Fee (if any) or from anyone other Office.	to re-apply any pre r than the applicant;	viously paid issue a registered attorn	fee to the applicately or use or agent; or u	ntion identified above. he assignee or other party in	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FHES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 11/04) Approved for use through 04/30/2007.

Paul D. Golian

Authorized Siggazure

Typed or printed name

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

42,591

3/10/05

Date

Registration No.



MAR 1 0 2005

#50%

# Bristol-Myers Squibb Company Patent Department

## **FACSIMILE TRANSMITTAL SHEET**

3/10/05

#### URGENT

TO:

USPTO - Issue Fee Branch

FAX NO.:

1-703-872-9306

FROM:

Paul D. Golian

**TELEPHONE NO.:** 

(609) 252-4091

**FACSIMILE NO.:** 

(609) 252-4526

RE:

U.S. Application Serial No.: 10/630,406

Attorney Docket No.: D0288 NP

Number of Pages:

3

(including cover sheet)

## CERTIFICATE OF TRANSMISSION VIA FACSIMILE

I hereby certify that this correspondence, a 1) Issue Fee Transmittal (1 page) and 2) "Fee Address" Indication Form (1 page) are being facsimile transmitted to the U.S. Patent and Trademark Office, Fax number 703-746-4000 on

Paul D. Golian/Depositor

THE INFORMATION CONTAINED IN THIS FAX MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE RECIPIENT(S) NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR AN AGENT RESPONSIBLE FOR DELIVERING TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR AND THAT ANY REVIEW, DISSEMINTATION, DISTRIBUTION, OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YO HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE, AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.